



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
WASHINGTON, D.C. 20372-5120

IN REPLY REFER TO

BUMEDINST 6260.29
BUMED-24
1 Sep 92

BUMED INSTRUCTION 6260.29

From: Chief, Bureau of Medicine and Surgery

Subj: OCCUPATIONAL HEALTH AND PREVENTIVE MEDICINE (OH/PM)
INDICATORS

Ref: (a) OPNAVINST 5100.23B
(b) SECNAVINST 5214.2B

Encl: (1) OH/PM Indicators Report
(2) Occupational Health Performance Indicators

1. Purpose. To provide instructions for preparing and using the Navy Occupational Health and Preventive Medicine (OH/PM) Indicators Report following reference (a).

2. Cancellation. BUMEDINST 6260.7C and NAVMEDCOMINST 6260.8.

3. Discussion. The OH/PM Indicators Report, enclosure (1), is designed to collect data which characterizes the work of field activities and is used by managers to evaluate program performance. Enclosure (2) contains a set of performance indicators developed by Navy occupational health professionals which will be reviewed at least annually by the Navy Environmental Health Center (NAVENVIRHLTHCEN) and revised as necessary. Each indicator is a measure of work either performed or required to support a particular program and attributed to a specific account code. This enables managers to evaluate work performed and support provided to satisfy particular program requirements. Once this basic initial report is implemented, preventive medicine and other program elements will follow. NAVENVIRHLTHCEN will update enclosures (1) and (2), with appropriate field input, as necessary to capture appropriate indicators of program effort.

4. Responsibilities and Procedures. The OH/PM Indicators Report applies to all medical treatment activities providing occupational health services. Each reporting activity must maintain an "audit trail" to verify reported data. Reported counts must be traceable to medical records, patient logs, appointment lists, etc. Reports supported by audit trails must be maintained locally for 2 years.

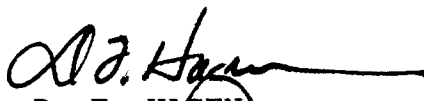
5. Action. Each medical command responsible for providing OH/PM services must submit a monthly report of those services to the Navy Occupational Safety and Health (NAVOSH) department of the



1 Sep 92

supporting Navy environmental and preventive medicine unit (NAVENPVNTMEDU) by the 15th day of the month following the end of the reported month. NAVENPVNTMEDUs must forward quarterly reports to the NAVENVIRHLTHCEN within 30 days following the reported month. The NAVENVIRHLTHCEN will forward the final report, with appropriate analysis to BUMED (MED-24) no later than 45 days from the end of the reporting period.

6. Report Exemption. The requirements contained in paragraph 5 are exempt from reports control by reference (b), part IV, paragraph G8. The formats in the appendices to enclosure (1) are approved for computer generation for reports submission.


D. F. HAGEN

Distribution:

SNDL, C28H (BRMEDCLINIC)
C31J (BRMEDCLINIC)
C34F (BRMEDCLINIC and NAVMEDCLINIC LONDON DET)
C58R (BRMEDCLINIC)
C85A (BRMEDCLINIC)
FA47 (NAVHOSP)
FA49 (NAVMEDCLINIC)
FB58 (NAVHOSP)
FB60 (NAVMEDCLINIC)
FC16 (NAVMEDCLINIC)
FC17 (NAVHOSP)
FF72 (NAVMEDCLINIC)
FT108 (NAVHOSP)
FT110 (NAVMEDCLINIC)
FW1 (NATNAVMEDCEN)
FW3 (NAVHOSP)
FW4 (NAVMEDCLINIC)

Copy to:

SNDL, 21A (CINCs)
23A2 (COMNAVFORJAPAN, COMNAVMARIANAS only)
23A3 (COMUSNAVCENT)
23B4 (COMIDEASTFOR)
28C2 (COMNAVSURFGRU LONG BEACH only)
28K1 (COMSUBGBRU TWO only)
42A1 (COMFAIRCARIB, COMFAIRKEFLAVIK)
42A3 (COMFAIRMED)
42B1 (COMHEWINGSLANT only)
42B2 (COMMATVAQWINGPAC, COMLATWINGPAC only)

BUMEDINST 6260.29
1 Sep 92

Copy to: (continued):

SNDL, C52 (BUMED SHORE BASED DETACHMENTS)
FA6 (NAS KEY WEST only)
FA24 (COMNAVBASE CHARLESTON, GUANTANAMO BAY, NORFOLK,
and PHILADELPHIA only)
FB28 (COMNAVBASE PEARL HARBOR, SAN DIEGO, SAN FRANCISCO,
and SEATTLE only)
FB50 (COMUSFAC)
FC3 (COMNAVACT UK only)
FF1 (COMNAVDIST)
FH (BUMED COMMAND ACTIVITIES)
FT1 (CNET)
FT2 (CNATRA)
FT5 (CNTECHTRA)
FT28 (NETC)
FT31 (NTC GREAT LAKES, ORLANDO only)
V3 (COMCABEAST only)
V8 (CG MCRD PARRIS ISLAND only)
V16 (CG MCB CAMP BUTLER, CAMP LEJEUNE, and CAMP PENDLETON
only)
V25 (CG MCAGCC)

Stocked:

Naval Aviation Supply Office
Physical Distribution Division Code 103
5801 Tabor Ave.
Phila., PA 19120-5099

OH/PM INDICATORS REPORT

1. Background. The OH/PM Indicators Report consists of four sections:

- a. Section A contains occupational medicine indicators data.
- b. Section B contains industrial hygiene indicators data.
- c. Section C is reserved (for preventive medicine).
- d. Section D contains personnel data.

Submit the OH/PM Indicators Report to the NAVOSH department of the supporting NAVENPVNTMEDU by the 15th of the month following the reported month. The NAVENPVNTMEDU will review the reports, resolving any omissions or irregularities, and forward the collected data, plus a consolidated report for each supported command, to NAVENVIRHLTHCEN by the 15th of the following month. NAVENVIRHLTHCEN will analyze and compile the submitted data, calculate appropriate performance indicators, and forward a consolidated and annotated report by the 15th of the following month to BUMED, with copies to each medical treatment facility (MTF).

2. General Instructions. Sections A and B collect indicators for work performed by OH personnel. OH personnel are defined as permanent or temporary civilian staff paid by WH funds and military personnel assigned to the OH department. These personnel are normally carried on manpower documents. Do not include work of personnel not assigned to the OH department in this report or work performed by volunteers, patients, or service clubs.

a. Command. Enter the name of the MTF providing OH services identified on this report.

b. Unit Identification Code (UIC). Enter the UIC of the MTF. The UIC must match the Navy Comptroller Manual, Volume 2, chapter 5.

c. Quarter/Fiscal Year. Enter the month and fiscal year of the reporting period.

SECTION A: OCCUPATIONAL MEDICINE INDICATORS (OMI) - FORMAT
AND INSTRUCTIONS
(Format appears in appendix A-1)

1.0 Total Patient Visits. Enter one count for each patient visit. This is equivalent to total patient visits defined in DoD Instruction 6010.13-M, Medical Expense and Performance Reporting System for Fixed Military Medical and Dental Treatment Facilities (MEPRS), January 1991. Categories of patients:

1.a. Military. Active duty and Reserve uniformed personnel of the United States (Navy, Marine Corps, Army, Air Force, Coast Guard, National Oceanic and Atmospheric Agency, and Public Health Service).

1.b. Civilian. Employees of the United States Government and foreign nationals hired by the United States Government (includes nonappropriated funded personnel).

1.c. Other. Persons not belonging to the above categories (i.e., dependents, contract employees, or other non-Government employees).

2.0 Total Examinations. This total is obtained by counting the number of patients seen by a provider for one or more of these programs: injury and illness treatment or retreatment, medical surveillance, certification, administration, asbestos medical surveillance program (AMSP), or hearing conservation program (HCP). One examination may involve more than one program. For example, a worker who is examined for AMSP, hearing conservation, and mixed solvents would be counted as one examination. Ancillary services for the examination are counted in section 4. Examples of providers in the occupational health unit include the physician, nurse practitioner, physician's assistant, audiologist, independent duty corpsman with credentials to perform examinations for medical surveillance, or a registered nurse performing assessments and examinations for medical surveillance and certification.

3.0 Programs. Examinations are divided into six program areas. An examination should not be recorded when the patient is seen solely for the purpose of having a test performed. Tests are recorded in the ancillary services section.

3.1 Injury and Illness Treatment or Retreatment. An examination performed for occupational or nonoccupational injury or illness, situational examinations, and individual counseling and education provided to maintain health. Count one for each examination recorded. An entry is made on a Chronological Record of Medical Care (SF-600), Emergency Treatment Record (SF-558), or Consultation Record (SF-513) and signed by a provider.

1 Sep 92

3.2 Medical Surveillance. Medical surveillance includes examinations provided to workers at risk of developing occupational disease. Workers are identified by industrial hygiene survey reports, safety inspections of the workplace, medical interview of worker, review of the occupational work history, and knowledge of work site. Count one for each examination performed. Examinations may be performed for preplacement or baseline, periodic, or termination. Specific programs are included in the Medical Surveillance Procedures Manual and Medical Matrix as:

Programs #101 through 499

Programs #501 through 599

Programs #601 through 699

3.3 Certification. Count one for each examination performed to determine physical qualifications for a specific job. Examinations may be performed for preemployment, periodic, or termination. Certification examinations are included in the Medical Matrix as Programs #701 through 799.

3.4 Administration. Count one for each examination performed at the request of management. Management may request a medical examination under the following circumstances: whenever there is a direct question about an employee's continued capacity to meet the physical or medical requirement of a position; when an individual is assigned to a new job which has specific physical requirements different from those of the current position; to determine medical limitations for an individual receiving continuation of pay or compensation. Other examinations include disability retirement and competence for duty.

3.5 AMSP. Count one for each examination performed for the AMSP, included in the Medical Surveillance Procedures Manual and Medical Matrix as Programs #113 through 116.

3.6 HCP/Audiology. Count one for each examination or diagnostic work-up performed by a provider to support the HCP, included in the Medical Surveillance Procedures Manual and Medical Matrix as programs #503 and #512. Screening audiograms and other tests performed by technicians are reported in the ancillary services section.

4.0 Ancillary Services. Ancillary services include all tests performed or requested to support OH programs. Ancillary services are those services (functions) that participate in the care of patients principally by assisting and augmenting providers in diagnosis, screening, and treatment of workers. The work unit assigned for reporting purposes is one test. The definition of one test is provided under the column heading, "Ancillary Services." Column a. "performed" documents work performed by OH staff, while column b. "requested" documents work requested by OH staff and performed by non-OH staff.

<u>Test Description</u>	<u>Performed</u>	<u>or</u>	<u>Requested</u>
4.1 Electrocardiogram (EKG) One test is an electrocardiogram.	Count one for each test performed by OH personnel		Count one for each patient referred for EKG.
4.2 Sight Screening One test is equal to one patient examined for any or all of the following: far or near visual acuity, intraocular pressure, color vision, or depth perception.	Count one for each patient examined by OH personnel.		Count one for each patient referred for examination.
4.3 Optometry Service One test is equal to one patient examined for any or all of the following: refraction, slit lamp, or visual confrontation.	Count one for each patient examined by OH-funded optometrist.		Count one for each patient referred for optometry examination.
4.4 Pulmonary Function Test One test is equal to one valid spirogram. A valid spirogram must include a minimum of three acceptable maneuvers.	Count one for each valid test performed by OH personnel.		Count one for each patient referred for testing.
4.5 Laboratory One test is equal to one chit. For example, Complete Blood Count (CBC) with differential is one test and Serum Multiple Analysis 20 is one test.	Count one for each lab chit requesting tests to be performed by OH personnel.		Count one for each patient referred for testing.
4.6 X-ray One test is equal to one chit. A chest x-ray for the AMSP will be counted twice, once for the "A" reading (SF 519A) and once for the "B" reading (NAVMED 6260/7).	Count one for each x-ray chit requesting x-rays to be taken by OH personnel.		Count one for each x-ray chit filled out requesting work to be done by non-OH staff.

<u>Test Description</u>	<u>Performed</u>	<u>or</u>	<u>Requested</u>
4.7 HCP Audiometry One test is equal to one audiogram. Test results must be recorded on DD 2215 or DD 2216 and performed for the purpose of obtaining reference, monitoring, 15 and 40 hour, or detailed surveillance.	Count one for each pure tone audiogram performed by OH personnel in support of the HCP.		Count one for each patient referred.
4.8 Other Audiometry One test is equal to one audiogram or tympanogram or fitting of ear plugs.	Count one for each audiogram performed by OH personnel in support of any program other than HCP. Count one for each test (other than audiogram) performed for HCP.		Count one for each patient referred for test.
5.0 Compensation. This section applies to cases of occupational illness and injury coming under the jurisdiction of the Federal Employees Compensation Act (FECA) Program, as administered through the Office of Worker's Compensation Programs.			
5.1 Number New Occupational Injury or Illness Cases Treated by MTF. Count one for each new case of occupational illness or injury seen and provided definitive treatment at the reporting MTF.			
5.2 Total Number New Occupational Injury or Illness Cases Sent to MTF. Count one for each new case of occupational illness or injury sent to the MTF for disposition and referred to the private sector for care.			
6.0 Narrative. This section is intended to include significant additional work performed by OH staff not reported in sections 3 and 4, including special projects and other items of interest.			

1 Sep 92

SECTION B: INDUSTRIAL HYGIENE INDICATORS (IHI) - FORMS
AND INSTRUCTIONS

(IHI format appears in appendix B-1)

1. Complete the IHI for each medical facility providing industrial hygiene services, following the instructions on the back of the form. Since each box in line 3 represents a separate UIC which provided services during the reporting period, the total survey workload requires the addition of all cells in line 4a and again for line 4b. Commands with greater than one MTF providing industrial hygiene services should submit a composite form showing the total number of UICs supported in line 3, the number of periodic surveys completed in line 4a and the number of baseline surveys completed in line 4b plus totals for sections 5 and 6. This composite form should be provided along with copies of all IHIs from individual MTFs each quarter. At the beginning of each fiscal year, NAVENVIRHLTHCEN will provide each BUMED command providing occupational health services a print-out (or floppy diskette, if preferred) of their record of activities (and UICs) supported and the employee population by the Chief of Naval Operations (CNO) industrial category (X1-X4).

SECTION C: PREVENTIVE MEDICINE

(Reserved.)

SECTION D: PERSONNEL SECTION

(Report format appears in appendix D-1)

1. Complete this section for each medical command that provided any occupational health services during the reporting quarter. If the reporting command has greater than one MTF providing occupational health services, submit a composite form listing totals from all MTFs for both supported populations and MTF staff along with copies of the individual facility reports. At the beginning of each fiscal year, NAVENVIRHLTHCEN will provide each medical command a copy of its staffing and supported population files for that command. After reviewing these files, the command should update the data and return the corrected copy to NAVENVIRHLTHCEN. In addition, summarize and submit numerical data using appendix D-1 format as the first quarter input for this section. Once the supported population is reported for the fiscal year (first quarter), it is not necessary to complete section 2 for the 2nd, 3rd, and 4th quarters unless there has been a significant change.

2. This section reports the total supported population as of the first of each fiscal year, broken down into categories as specified in reference (a), section 3008c(2).

3. This section reports the number of OH staff members onboard the last day of the reporting period. Count full-time, permanent civilian (not temporary) positions providing OH services. Count military personnel providing OH services that are assigned greater than 50 percent of the time during the reporting quarter. If a military provider is assigned less than 50 percent of the time, is the only one of that type of provider, and contributes a vital function, count as one provider and list the percentage of time in parentheses.

4. The responsible person providing this personnel information should sign this section validating the accuracy of the data provided.

1 Sep 92

OCCUPATIONAL MEDICAL INDICATORS

COMMAND: _____	UIC: _____		QTR/FISCAL YEAR _____	
	a. Military	b. Civilian	c. Other	
1.0 TOTAL PATIENT VISITS				

2.0 TOTAL EXAMINATIONS

--

3.0 PROGRAMS

	a. Military	b. Civilian	c. Other
3.1 INJURY AND ILLNESS (TREATMENT OR RETREAT)			
3.2 MEDICAL SURVEILLANCE			
3.3 CERTIFICATION			
3.4 ADMINISTRATION			
3.5 AMSP			
3.6 HCP/AUDIOLOGY			

4.0 ANCILLARY SERVICES	a. Performed	b. Requested
4.1 ELECTROCARDIOGRAM		
4.2 SIGHT SCREENING		
4.3 OPTOMETRY SERVICE		
4.4 PULMONARY FUNCTION TEST		
4.5 LABORATORY		
4.6 X-RAY		
4.7 HCP AUDIOMETRY		
4.8 OTHER AUDIOMETRY		

5.0 COMPENSATION

5.1 NUMBER NEW OCCUPATIONAL INJURY OR ILLNESS CASES TREATED BY MTF	
5.2 TOTAL NUMBER NEW OCCUPATIONAL INJURY OR ILLNESS CASES SENT TO MTF	

6.0 NARRATIVE:

Submitted by: _____ Telephone: DSN _____ COM _____

Appendix A-1

1.a. Activity reporting:	1.b. UIC:			
2.a. Reporting period:	1	2	3	4
Quarter				
Fiscal Year:				

[illegible]

4. SURVEYS

[illegible]

4.a. Periodic Date Complete

[illegible]

4.b. Baseline
Date Complete

[illegible]

3. Activity UIC

[illegible]

4. SURVEYS

[illegible]

4.a. Periodic Date Complete

[illegible]

4.b. Baseline
Date Complete

5. SAMPLES

6. EXPOSURES

--	--	--	--

5.a. Asb/ID

MIL **CIV**

CIV

5.b. Asb/count

--	--

6.a. PEL

5.c. Other

5.d. Non-CIHLs

7. Signature of report originator

Title

Telephone: DSN

Commercial ()

Commercial ()

INDUSTRIAL HYGIENE INDICATORS

- 1.a. Activity Reporting. Name of activity providing industrial hygiene services. This could be a naval hospital, naval medical clinic, Navy environmental and preventive medicine unit, etc.
- 1.b. UIC. Unit Identification Code (UIC) or Recruiting Unit Code (RUC). UIC of the activity providing the industrial hygiene services. If an activity has a UIC and a RUC, report the UIC.
- 2.a. Reporting Period: 1, 2, 3, 4 Quarter. Circle with ink the fiscal year quarter being reported. Example: If the productivity report is for the first quarter of the fiscal year, then the number 1 is circled.
- 2.b. Year. Enter fiscal year being reported.
3. Activities Receiving Industrial Hygiene Services. Under each of the vertical columns headed "UIC," enter the UIC for the activity being reported. Use each column to identify a different activity by its UIC. If an activity has a UIC and a RUC, report the UIC. Enter UICs only for those activities for which "actual work" was performed during the time period reported. If no work was performed for an activity during the reporting period, then no UIC should be entered.
4. Surveys. Under these headings only two types of surveys are recognized for reporting purposes, the periodic and the baseline. Any type of work performed for a supported activity will be reported under its UIC.
 - 4.a. Periodic Date Complete. Use this entry once the periodic survey is completed. The periodic survey is a survey of an entire activity subsequent to the baseline survey. It provides a single document that updates the baseline survey on a regular basis. It provides information on workplace changes, includes baseline surveys for new processes, reports on the status of the workplace monitoring plan, and modifies it based on changes in the working environment. Enter the date that the periodic survey is completed.
 - 4.b. Baseline Date Complete. Once a baseline survey is completed, this entry should not be used again. The baseline survey is the initial industrial hygiene evaluation of an entire activity against which all subsequent surveys are compared. Requirements for a baseline survey are detailed in Chapter 8 of OPNAVINST 5100.23B. Enter the date of completion of the baseline survey.
5. Samples. This section is used to list all samples collected or analyzed by industrial hygienists. Include those samples collected by workplace monitors or non-Bureau of Medicine and Surgery (BUMED) industrial hygienists which are processed by the cognizant medical activity.
 - 5.a. Asb/I.D. (Asbestos/Identifications). Enter number of asbestos identifications performed in-house. Include only identifications using polarized light microscopy/dispersion staining techniques.
 - 5.b. Asb/Counts (Asbestos/Counts). Enter the number of fiber counts performed in-house.
 - 5.c. Other. Enter all other analysis conducted in-house such as colorimetric and gravimetric tests.
 - 5.d. Non-CIHLS. Enter the number of samples sent to non-Navy laboratories during the reporting period.
6. Exposures. This section is used to report personnel exposures to chemical and physical agents, permissible exposure level (PEL) based on industrial hygiene sampling results. Note: Do not include noise exposures on this report.
 - 6.a. PEL. Enter the number of military and civilian personnel exposed above the PEL during this reporting period.
 7. Self explanatory.

BUMEDINST 6260.29
1 Sep 92

(Reserved for Preventive Medicine)

(Appendix C-1)

1 Sep 92

OCCUPATIONAL HEALTH (OH) INDICATORS

PERSONNEL SECTION

1. Command: _____ UIC: _____ Fiscal Year: _____
 Quarter: _____

2. Provide the number of supported commands and the total supported population as of the first of each fiscal year, broken down into categories specified in reference (a), section 3008c(2).

	COMMANDS	MILITARY	CIVILIAN	OTHER
X1	_____	_____	_____	_____
X2	_____	_____	_____	_____
X3	_____	_____	_____	_____
X4	_____	_____	_____	_____
Total	_____	_____	_____	_____

3. Provide the number of OH staff members onboard the last day of the reporting period. Count full-time, permanent civilian (not temporary) positions providing OH services. Count military personnel providing occupational health services that are assigned greater than 50 percent of the time during the reporting quarter. If a military provider is assigned less than 50 percent of the time, is the only one of that type of provider and contributes a vital function, count as one provider and include the percentage of time in (____).

	MILITARY	CIVILIAN
a. Audiologist	_____	_____
b. Audiology Technician	_____	_____
c. Chemist	_____	_____
d. Clerk; Secretary	_____	_____
e. Health Tech (Lab, X-ray, HMX, etc.)	_____	_____
f. Industrial Hygienist	_____	_____
g. Industrial Hygiene Tech	_____	_____
h. Management Asst.; Admin., etc.	_____	_____
i. Optometrist	_____	_____
j. Physician	_____	_____
k. Physician's Assistant	_____	_____
l. Physiotherapist	_____	_____
m. Professional Nurse/RN (OH Nurse)	_____	_____
n. Radiation Health	_____	_____
o. All Other	_____	_____
p. Total	_____	_____

4. Signature of report originator: _____

Telephone: DSN _____ Commercial _____

Appendix D-1

OCCUPATIONAL HEALTH PERFORMANCE INDICATORS

Performance Indicators (P.I.)

1. OH demand = $\frac{\text{Population supported}}{\text{Total occupational health staff}}$

Units: Workers/OH staff

Total supported population (military, civilian, and others) divided by total number all OH staff members onboard the last day of the reporting period.

2. IH baseline effort = $\frac{\text{Number of baseline surveys completed} \times 100}{\text{Total number of facilities supported}}$

Units: Percent baseline surveys completed

The sum of boxes in row 4.b of industrial hygiene indicators (IHI) (Appendix B-1) with a completion date listed, divided by the number of facilities supported (available from NAVENVIRHLTHCEN).

3. IH survey effort = $\frac{\text{Number of current periodic IH surveys} \times 100}{\text{Total number of facilities supported}}$

Units: Percent periodic surveys completed

The sum of boxes in row 4.a IHI with a completion date within the reporting fiscal year, divided by number of facilities reported in the denominators of P.I. 2.

4. IH exposure index =

$$\frac{\text{No. of workers exposed} > \text{permissible exposure limit} \times 200,000}{\text{Total hours worked}}$$

Units: Exposed workers/200,000 hours worked

Sum of numbers reported in row 6.a of IHI divided by the product of the population supported (numerator of P.I. 1) times 1,920.

5. Service Effort = $\frac{\text{Number of ancillary services provided}}{\text{Total examinations provided}}$

Units: Ancillary services per examination

Total number of ancillary services reported in column A, rows 4.1-4.8 divided by the total number of examinations reported in line 2.0.

BUMEDINST 6260.29

1 Sep 92

$$6. \text{ HCP workload} = \frac{\text{Number of audiograms performed} \times 1,000}{\text{Total population served}}$$

Units: Audiograms/1,000 workers

Number of audiograms reported on line 4.7.a of Occupational Medicine Indicators (OMI) section times 1,000 divided by population used in P.I. 1.

$$7. \text{ AMSP workload} = \frac{\text{Number of AMSP examinations} \times 1,000}{\text{Total population served}}$$

Units: Examinations/1,000 workers

Sum of all surveillance examinations reported on line 3.5, columns A, B, and C of OMI times 1,000 divided by the population used in P.I. 1.

$$8. \text{ Surveillance workload} = \frac{\text{No. of medical surveil. exams} \times 1,000}{\text{Total population served}}$$

Units: Examinations/1,000 workers

Sum of all surveillance examinations reported on line 3.2, columns A, B, and C of OMI times 1,000 divided by the population used in P.I. 1.

$$9. \text{ Medical care workload} = \frac{\text{Number of Medical Care Exams} \times 1,000}{\text{Total Population Supported}}$$

Units: Examinations/1,000 workers
(Medical care = injury/illness/treat/retreat)

Sum of number of examinations reported on line 3.1, columns A, B, and C of OMI times 1,000 divided by total population supported used in P.I. 1.

$$10. \text{ OH provider effort} = \frac{\text{Total OH examinations}}{\text{Total OH providers}}$$

Units: Examinations/OH providers

Total number of examinations provided and reported in block 2 of OMI divided by the total occupational health providers (physicians, PA's, OHN's, RN's, nurse practitioners, and health technicians), both assigned and borrowed, section D3, rows A, B, C, D, and G on the last day of the reporting period.

11. Compensation case frequency = $\frac{\text{Total compensation cases} \times 1,000}{\text{Total supported population}}$

Units: Cases per 1,000 supported population

Total number of new occupational illness and injury cases with submitted CA-1, CA-2, or CA-2A forms reported in box 5.2 of OMI times 1,000 divided by total supported population from P.I. 1.

12. In-house compensation care = $\frac{\text{Comp cases receiving care in MTF}}{\text{Total compensation cases}}$

Units: Percent cases treated in-house

Total number of compensation cases receiving definitive care within the BUMED system of MTFs reported in box 5.1 of OMI divided by the total number of compensation cases reported in the numerator of P.I. 11.